

**Issue Classification**

(Assistant Examiner) (Date)

(Legal Instruments Examiner) / (Date

**TAOFIQ SOLOLA**  
**PRIMARY EXAMINER**  
(Primary Examiner) (

(Date)  
7/18/05

**Total Claims Allowed:**

5

O.G.  
Print Claim(s)

O.G.  
Print Fig.

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant												<input type="checkbox"/> CPA			<input type="checkbox"/> T.D.			<input type="checkbox"/> R.1.47	
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	5			35			65			125			155			185			
	6			36			66			126			156			186			
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	9			39			69			129			159			189			
	10			40			70			130			160			190			
	11			41			71			131			161			191			
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	21			51			81			141			171			201			
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